

CLAIMS ONLY

Application Number

101530,301

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
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50							50					
Total Indep												
Total Depend												
Total Claims												

Total Indep

Total Depend

Total Claims

Total Indep

Total Depend

Total Claims

10/530,301

CLAIM	DATE
FINAL	ORIGINAL
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